FORM DAECENED TO SECURIT

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

/ NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

1378572

OMB APPROVAL

OMB Number: 3235-0076
Expires: April 30, 2008
Estimated average burden
hours per response.16.00

SEC USE ONLY					
Prefix	Serial				
DATE RECI	EIVED				
1	1				

Name of Offering (check if this is an amendment and name has changed, and indicate change.)						
Carlyle Infrastructure Partners, L.P Offer and Sale of Limited Partnership Interests	A AFRICA REMARKATION OF THE RESIDENCE AND ARREST AND ARREST AND ARREST A					
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) UL	OE HAMANAMANAMANAMANAMANAMANAMANAMANAMANAMA					
Type of Filing: New Filing Amendment No. 4						
A. BASIC IDENTIFICATION DATA	ranum com istra dom istra film titl til 1000 il til 1191.					
1. Enter the information requested about the issuer	<u> </u>					
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)						
Carlyle Infrastructure Partners, L.P. (the "Partnership")	·					
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)					
1001 Pennsylvania Ave., NW, Suite 220 South, Washington, D.C. 20004 (202) 347-262						
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)					
(if different from Executive Offices) same same	PROCECOS					
Brief Description of Business Investment Fund						
	CED 1					
Type of Business Organization	please specify): THOMASON F					
☐ corporation ☐ limited partnership, already formed ☐ other (☐	please specify):					
□ business trust □ limited partnership, to be formed	- FINONISONA					
Month Year	FIVANCIAI					
Actual or Estimated Date of Incorporation or Organization: 0 5 0 6 Actual E	stimated					
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:						
CN for Canada; FN for other foreign jurisdiction)	DE					

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File. A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. ⊠ General aпd/or Check Box(es) that Apply: Promoter ☐ Executive Officer □ Director ☐ Beneficial Owner Managing Partner Full Name (Last name first, if individual) Carlyle Infrastructure General Partner, L.P. (the "General Partner" or "general partner of the Partnership") Business or Residence Address (Number and Street, City, State, Zip Code) 1001 Pennsylvania Avenue, NW, Suite 220 South, Washington, D.C. 20004 General and/or Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director Managing Partner Full Name (Last name first, if individual) TC Group Infrastructure, L.L.C. ("Infrastructure LLC" or "general partner of the General Partner) Business or Residence Address (Number and Street, City, State, Zip Code) 1001 Pennsylvania Avenue, NW, Suite 220 South, Washington, D.C. 20004 General and/or ☐ Executive Officer Director Beneficial Owner Managing Partner Full Name (Last name first, if individual) TC Group, L.L.C. ("TC Group" or "sole member of Infrastructure LLC") Business or Residence Address (Number and Street, City, State, Zip Code) 1001 Pennsylvania Avenue, NW, Suite 220 South, Washington, D.C. 20004 ☐ Director General and/or Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer Managing Partner Full Name (Last name first, if individual) TCG Holdings, L.L.C. ("Holdings" or "managing member of TC Group") Business or Residence Address (Number and Street, City, State, Zip Code) 1001 Pennsylvania Avenue, NW, Suite 220 South, Washington, D.C. 20004 Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Conway, William E., Jr. (managing member of Holdings) Business or Residence Address (Number and Street, City, State, Zip Code) 1001 Pennsylvania Avenue, NW, Suite 220 South, Washington, D.C. 20004 ☐ Director General and/or Check Box(es) that Apply: Promoter Beneficial Owner ☐ Executive Officer Managing Partner Full Name (Last name first, if individual) D'Aniello, Daniel A. (managing member of Holdings) Business or Residence Address (Number and Street, City, State, Zip Code) 1001 Pennsylvania Avenue, NW, Suite 220 South, Washington, D.C. 20004 ☐ Executive Officer General and/or ☐ Beneficial Owner ☐ Director Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

Rubenstein, David M. (managing member of Holdings)

Business or Residence Address (Number and Street, City, State, Zip Code)
1001 Pennsylvania Avenue, NW, Suite 220 South, Washington, D.C. 20004

Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i TAQA New World, Inc.	if individual)				
Business or Residence Addre Abu Dhabi National Energ	•		*		
	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i Carlyle Infrastructure TE				•	
Business or Residence Addre 1001 Pennsylvania Avenue	•				
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, i California Public Employe	•	System			
Business or Residence Addre Lincoln Plaza East, 400 Q S	•				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, i	if individual)				
Business or Residence Addre	ess (Number a	and Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ess (Number a	and Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	if individual)				
Business or Residence Addre	ess (Number a	and Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	if individual)				
Business or Residence Addre	ess (Number a	and Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ess (Number s	and Street City State 7in	Code)		

•	•			B. II	NFORMAT	TION ABO	UT OFFEI	RING				-
1. Has the	issuer sold	, or does the	e issuer inte								Yes	No ⊠
Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual? * unless waived by general partner								\$10.000.000 *				
Z. Wildt is	die minim	ann m. 703m	Cite tilde will	oc accepie	a nom any	mar radar.		## TO 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ATOLINI PART			
3. Does the offering permit joint ownership of a single unit?									Yes	No		
commis a persor states, l broker	ssion or sim n to be liste list the nam or dealer, yo	ilar remune d is an asso e of the bro ou may set	ted for each ration for so ociated perso oker or deal forth the inf	olicitation on or agent er. If more	of purchaser of a broker than five (s in connec or dealer r (5) persons	tion with sa egistered w to be listed	les of secur ith the SEC	ities in the and/or wit	offering. If h a state or	•	
Full Name	(Last name	first, if ind	ividual)									
Business o	r Residence	Address (N	Number and	Street, City	y, State, Zip	Code)						
Name of A	ssociated B	roker or De	ealer									
States in W	/hich Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchasers						
			lividual Sta					••••	•••••	**************		. All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	(DE)	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]
	(Last name		lividual) Number and	Street, Cit	y, State, Zip	Code)		±•				
Name of A	ssociated B	roker or De	ealer									
			s Solicited of						,			
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[MM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]
	(Last name					. ,						
	(2001)	,	,									
Business o	r Residence	Address (l	Number and	Street, Cit	y, State, Zip	Code)						
Name of A	ssociated B	roker or De	ealer							· · · · · · · · · · · · · · · · · · ·		
States in W	Vhich Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchasers						
			lividual Sta					.,,,,,,,,,,,				. 🗌 All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
(RII	(SC)	[SD]	[TN]	[TX]	ſIJŢĬ	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Offering Price Sold Type of Security \$0.00 \$0.00 Common Preferred \$0.00 Partnership Interests \$1,000,000,000.000 \$647,017,500.00)......\$0.00 \$0.00 Other (Specify _ \$647,017,500.00 Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Dollar Amount Number of Purchases Investors Accredited Investors..... \$647,017,500.00 37 Non-accredited Investors <u>0</u> \$0.00 Total (for filings under Rule 504 only)..... Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Dollar Amount Type of Security Sold Type of offering Rule 505 Regulation A..... Rule 504..... Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. \$0.00 Transfer Agent's Fees 図 Printing and Engraving Costs.... \$25,000.00 \boxtimes Legal Fees..... \$700,000.00 П \$0.00 Accounting Fees Engineering Fees П \$0.00 Sales Commissions (specify finders' fees separately)..... \$0.00 Other Expenses (identify) travel, miscellaneous ☒ \$75,000.00 ☒ \$800,000.00

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

		NUMBER OF INVESTORS, EXPENSES A			ROCEEDS	
	b. Enter the difference between the aggregate of and total expenses furnished in response to Part C proceeds to the issuer."	- Question 4.a. This difference is the "adjusted	l gros:	l S		\$999,200,000.00
j.	Indicate below the amount of the adjusted gross proc the purposes shown. If the amount for any purpose is left of the estimate. The total of the payments listed	s not known, furnish an estimate and check the box	to the	e		
	forth in response to Part C - Question 4.b above.			Off Direc	nents to ficers, ctors, & filiates	Payments to Others
	Salaries and fees			<u>\$0.00</u>		\$0.00
	Purchase of real estate			\$0.00		\$0. <u>00</u>
	Purchase, rental or leasing and installation of	machinery and equipment		\$0.00		\$0. <u>00</u>
	Construction or leasing of plant buildings and	facilities		<u>\$0.00</u>		\$0.00
	Acquisition of other business (including the va offering that may be used in exchange for the					
	issuer pursuant to a merger)			<u>\$0.00</u>		<u>\$0.00</u>
	Repayment of indebtedness			\$0.00		<u>\$0.00</u>
	Working capital			\$0.00	\boxtimes	\$999,200,000.00
	Other (specify):					
				<u>\$0.00</u>		\$0.00
	Column Totals			\$0.00	\boxtimes	\$999,200,000.00
					\$999,200,00	00.00
		D. FEDERAL SIGNATURE				· · · · · · · · · · · · · · · · · · ·
si	he issuer has duly caused this notice to be signed by gnature constitutes an undertaking by the issuer to formation furnished by the issuer to any non-accred	furnish to the U.S. Securities and Exchange Con	mmiss	sion, upon	under Rule 505, i written request of	the following f its staff, the
Is	suer (Print or Type)	Signature		// I	Date	
C	arlyle Infrastructure Partners, L.P.	1 the	<u> </u>	// s	eptember 21,2	007
	ame of Signer (Print or Type)	Title of Signer (Print or Type)		i		
D	aniel A. D'Aniello	Authorized Person				

ATTENTION

E. STATE SIGNATURE			
1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	<u>N/A</u>	Yes	No ⊠
See Appendix, Column 5, for state response.			

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied. N/A

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date:	
Carlyle Infrastructure Partners, L.P.		September	, 2007
Name (Print or Type)	Title (Print or Type)	<u> </u>	***
	Authorized Person		

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.